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AUTHOR Price, Lynda
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ABSTRACT

The literature review examines two questions: (1) what are the psychosocial implications of a learning disability; and (2) how can these socio-emotional issues be effectively addressed by various professionals in secondary and postsecondary settings. Twenty-eight references are reviewed. The review concludes that the lasting psychosocial ramifications of learning disabilities often include a pervading sense of low self-esteem and inappropriate or inadequate social skills. Common suggestions in the literature include individual and/or group counseling for learning-disabled persons to increase disability self-awareness. The lack of empirical studies in this area is noted as is the lack of trained professionals and materials/techniques for intervention efforts. (DB)

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A Selective Literature Review Concerning the Psychosocial Issues of LD Adolescents and Adults

Lynda Price

The LD Transition Project
University of Minnesota--General College
106 Nicholson Hall
216 Pillsbury Drive S.E.
Minneapolis, MN. 55455
(612) 625-7578

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INTRODUCTION

It is a challenging experience to provide effective services for learning disabled adolescents and adults in secondary and postsecondary settings. Often, a significant factor is the psychosocial ramifications of a student's disability. For instance, is the student aggressive or withdrawn? Does the student have appropriate or inappropriate social skills? Does the student appear depressed? Does she or he have problems communicating with others? All of these questions, and many more, frequently confront professionals when they try to find the best approach to work with LD students and meet their individual needs.

Many professionals believe that there is a significant relationship between learning disabilities and social or psychological disorders. For example, Cohen (1985) states that "although there are many children with learning problems who are not learning disabled, there are virtually no learning disabled children or adolescents who do not evidence significant psychological conflicts and concerns."

As a result, this paper will focus on two fundamental questions: What are the psychosocial implications of a learning disability? How can these socio-emotional issues be effectively addressed by various professionals in secondary and postsecondary settings?

I have selected a number of representative articles to explore the questions in greater depth. These articles provide useful information to LD service providers about the psychosocial needs of their students from a number of perspectives. In addition, I have highlighted specific ideas or techniques whenever possible that LD service providers may want to explore further on their own.

SELECTED CITATIONS

Alley, G., Deshler, D., Clark, F., Schumaker, J. & Warner, M. (1983). Learning disabilities in adolescent and adult populations: Research implications (Part II). Focus on Exceptional Children. 15(9). 1-14.

This article explores information from the extensive, epidemiological database developed at the University of Kansas Institute for Research in Learning Disabilities. A number of areas are discussed, including the relationship between learning disabilities and social skills. The authors looked at two major questions: Do LD individuals differ socially from their non-LD peers? Is their social behavior a handicap that must be remediated if they are to become successful, satisfied adults?

The authors discuss a number of observations to answer the questions, such as: 1) LD adolescents are more like low achieving (i.e. LA) students than normal achieving (i.e. NA) students, 2) LD adolescents interact with their peers at rates equal to their non-LD peers, 3) The quality of LD adolescents' social interactions is like that of non-LD individuals with social problems, 4) The quality of their interactions differs from normal achievers (i.e. NA) in some social situations, 5) Many social problems continue to affect the LD individual after high school, 6) LD adolescents can use complex social skills for novel role-playing situations, and 7) LD adolescents may have problems applying newly-learned social skills within a natural environment.

They conclude that social skill deficits cannot be classified solely as a characteristic of learning disabilities. However, many LD individuals have social skills problems that will strongly influence their lives after high school graduation.

Beare, D. (1975). Self-concept and the adolescent L/LD student. TPGA Journal. 4 (1). 29-32.

This article discusses the influence that a negative self concept can have upon LD students. Beare describes how many LD individuals have a long history of academic failure which has been translated into a damaged, negative self-image. He feels that professionals often treat such a negative image as only a short-term problem, when it actually will have long-term effects upon the LD individual. He offers a number of

suggestions to enhance the LD student's self-concept: 1) Recondition the LD student's self-image through academic success, 2) Provide accurate, individualized information to LD students about themselves, 3) Use personalized information about individual strengths and weaknesses to integrate a positive self-concept, 4) Give information and support to the parents of LD students, whenever possible.

Bergman, M. (1986). Organic dysfunction linked to LD disrupts normal social development. Hill Top Spectrum. 3 (3). 2-5, 8.

This article explores the ramifications of organic brain dysfunction on the social skills of learning disabled children, adolescents and adults. Bergman asserts that "increasingly persuasive evidence has accumulated linking disabilities with organic dysfunction." She describes various areas of the brain and their functions (e.g. frontal region, temporal lobe, parietal region, occipital region, posterior and anterior regions). The author's detailed discussion of social skill deficits resulting from right and left hemisphere lesions is especially helpful. Examples are her explanations of the misunderstandings of nonverbal communication seen in individuals with right hemisphere dysfunction and poor verbal fluency observed in individuals with left hemisphere dysfunction. This valuable information is also condensed in a brief chart that summarizes various consequences of lesions to the brain.

**Please Note*: For further information about various articles in the Hill Top Spectrum discussing psychosocial issues and learning disabilities, also see: Hill Top Spectrum. 3, (1-4). Hill Top Preparatory School, Rosemont, PA. (ERIC Document Reproduction Service No. ED 273 083).

Brill, J. & Brown, D. (1986). Keeping your job at the water cooler: Social skills, employment and learning disability. In Association on Handicapped Student Service Programs in Postsecondary Education (Ed.), Support Services for LD Students in Postsecondary Education: A Compendium of Readings (pp.129-133). Columbus, Ohio: Association on Handicapped Student Service Programs in Postsecondary Education.

Appropriate social skills are instrumental for learning disabled individuals to find or keep satisfactory employment. Because social skills

are such a vital part of vocational success, Brill and Brown discuss how Disabled Student Services providers, Career Planning professionals, and Rehabilitation counselors should work with social skill deficits before LD students leave the postsecondary setting. The authors describe various practical ways that professionals can remediate inappropriate socialization. They also discuss a sample social skills curriculum and suggest where to find related referrals and resources.

Brown, D. (1982). Rehabilitating the learning disabled adult. Washington D C: President's Committee on Employment of the Handicapped. (ERIC Document Reproduction Service No. 230 751).

Testimonials from adults with learning disabilities frequently point to the negative influence that social skill deficits have on their daily lives. Brown uses powerful interviews with LD adults to illustrate the effects of social skill problems in the workplace. For example, she explains that some LD individuals who have perceptual problems in academic areas may also experience difficulty understanding social cues, (e.g. body language, facial expressions or tone of voice).

The author believes that many LD adults develop emotional problems as a direct result of society's inability to understand their learning disability. She strongly advocates that LD adults receive understandable, accurate knowledge about their individual learning problems. Self-knowledge is critical for LD individuals. Without it, they can internalize their failures and perceive themselves as crazy, weak, not intelligent or not motivated . All of these inaccurate messages will lead to low self-esteem, which further cripples the LD adult. Brown concludes the article by discussing many innovative ways that LD individuals have learned to compensate for their disability.

**Please Note:* This article has also been published in American Rehabilitation (1982). 7(3).

Clary, L. M. (1984). Identifying metacognitive skills in young adults. Paper presented at the 21st Convention of Association for Children and Adults with Learning Disabilities, New Orleans, LA. (ERIC Document Reproduction Service No. ED 249705).

This paper describes the use of metacognitive skills with social skill deficits found in young adults with learning disabilities. Clary advocates

teaching strategies to LD individuals that help them to analyze their own social skill inadequacies. After the LD students have examined their own behavior, they apply metacognitive strategies to typical social situations. Self-monitoring is emphasized whenever possible. Ways that teachers, parents, and counselors can assist the LD individual is also discussed. The author includes a description of self-assessment scales, modified checklists and a secondary social skills model.

Cohen, J. (1985). Learning disabilities and adolescence: Development considerations. In S.C. Feinstein (Ed.), Adolescent Psychiatry, Development and Clinical Studies, (vol. 12, pp. 177-195). Chicago: University of Chicago. pp. 177-195.

This article highlights interesting information about the effects of learning disabilities on ego functioning, ego development and other inter-related psychological processes.

Cohen uses his study of fifteen high school and college learning disabled students as a vehicle to explore the psychosocial ramifications of learning disabilities. He believes that the ways that others respond to the LD student will have a great impact on the student's development. He postulates that LD individuals have major concerns about themselves which strongly influence their self-perceptions. These concerns may be the result of past messages heard from parents, siblings, peers, or teachers. Consequently, the negative feedback is internalized by the LD student into low self-esteem and other psychosocial problems.

Cohen asserts that virtually all of the LD adolescents he studied showed chronic, low-level depression. He also observed that the LD student's conscious experience of self was strongly skewed by feelings of incompetence, inadequacy, and the anxious anticipation of failure. He believes that LD individuals may have an internal lack of self integration, due to the dynamics of their disability. For example, the LD students in the study described themselves as "dumb, damaged, and inadequate". He also believes that the subtle and ongoing effects of a learning disability in time will result in a state of cumulative trauma for LD individuals.

**Please Note*: For further information by the same author discussing these issues, also see: Cohen, J. (1984). The learning disabled university student: Signs and initial screening. NASPA Journal. 3(2). 22-31.

Cooper, R. (1986). Personal counseling for the learning disabled college student. In Association on Handicapped Student Service Programs in Postsecondary Education (Ed.), Support Services for LD Students in Postsecondary Education: A Compendium of Readings. (pp. 109-111). Columbus, Ohio: Association on Handicapped Student Service Programs in Postsecondary Education.

Three important questions critical to effective counseling for learning disabled students in postsecondary settings are discussed in this article: How does the college counselor help LD students? What counseling techniques are useful for this population? Is there a difference between counseling students with learning disabilities and their non-disabled peers?

In response to these questions, Cooper feels that the counselor should first examine his/her own attitudes towards disabled students. Once the counselor feels comfortable with LD students, she or he can then assist LD individuals in developing disability self-awareness.

In general, Cooper feels that personal counseling can be very beneficial for students with learning disabilities. Unlike non-disabled students, learning disabled students may need extra assistance with social skills from the postsecondary counselor. For example, the counselor may need to "teach" the LD student new, appropriate behaviors, as the student may not automatically learn them. The counselor should also be sensitive to the fear of failure and subsequent feelings of rejection that many LD students experience.

Geist, C. S. & McGrath, C. (1983). Psychosocial aspects of the adult learning disabled person in the world of work: A vocational rehabilitation perspective. Rehabilitation Literature. 44 (7). 210-13.

This paper explores different vocational alternatives available to learning disabled adolescents and young adults. Appropriate strategies and techniques that can be used by a vocational rehabilitation counselor with LD clients are also described.

The major focus of this article is a discussion of the psychosocial characteristics seen in their work with LD individuals. They often observed a low self image in these clients. They report that the LD individuals often see themselves as failures. As a direct consequence, LD adults may sabotage their own success. Adults with learning disabilities may also perpetuate a negative self image because these feelings are

known and comfortable to them. For example, the authors describe their observations of some LD women who have chosen marriage primarily because they can them "play out a vital, productive and non-academically constructive role in their environment." These LD women often then become wives who are very dependent upon their husbands.

Geist and McGrath describe some of their LD clients as frustrated, angry, depressed and dependent. They also assert that some are withdrawn or may be emotionally disturbed. The authors theorize that LD children, from a very early age, may see society as hostile, demanding and threatening. The result may be neurotic defenses and maladaptive behaviors.

The authors suggest effective counseling focused on specific goals applicable to LD individuals as a way to address these negative, socio-emotional characteristics. They assert that the most important counseling goal should be to help the LD individual achieve a balanced self-perspective of his/her own strengths and weaknesses.

Hogenson, D. (1985). Positive personality qualities in successful dyslexic adults. Hill Top Spectrum. 3(2). 7-8.

This brief article describes positive characteristics which the author believes contribute significantly to the lives of dyslexic adults. Hogenson uses Cantell's human personality factor analysis to categorize the positive factors which he has observed in his work with dyslexic individuals. They are: warmth, intelligence, ego strength, dominance, impulsivity, conformity, and boldness. The author also believes that family, peers and school are the three major support systems in a child's life. He feels that if at least two of these support systems are present for the dyslexic child, general mental health and positive self-esteem will develop.

**Please Note:* For further information from various articles in the Hill Top Spectrum discussing psychosocial issues and learning disabilities, also see: Hill Top Spectrum. 3. (1-4). Hill Top Preparatory School, Rosemont, PA. (ERIC Document Reproduction Service No. ED 273 083).

Hoffmann, F. J., Sheldon, K. L., Minskoff, E. H., Sautter, S. W., Steidle, E. F., Baker, D. P., Bailey, M. B., & Echols, L. D. (1987). Needs of learning disabled adults. Journal of Learning Disabilities. 20 (1). 43-52.

This authors discuss the results of a survey of service providers for learning disabled adults, consumers/advocates for learning disabled adults and learning disabled adults themselves. They concluded that LD adults have important needs that must be met in these areas: academic, social, personal, and vocational. A major theme of this article is a description of social skills and personal problems reported in the surveys. The most frequent social skill problem described by all respondents in all three groups was impulsivity. Other social skill problems were shyness, dating, dependency, making and keeping friends, and making conversation. All three groups surveyed reported frustration as the most frequently reported personal problem. Other personal problems listed were lack of self-confidence, controlling emotions and one's temper, depression, lack of motivation and daydreaming.

The authors also noted that 13% of the LD adults in the sample had received some form of therapy prior to the survey, 9% had been receiving help from a counselor and 5% had previously been in a mental hospital or psychiatric ward. Practically none of the LD adults had any previous experience in an LD support group.

The authors concluded from the survey results that: 1) LD adults do not fully understand themselves or accept their disability. 2) Low self-concept is a major barrier for LD adults and contributes significantly to vocational problems. 3) Social skill development and mental health assistance should be provided in conjunction with vocational training .

Huestis, R. & Ryland, C. (1986). Integrating learning disabilities into the life of adolescents. Paper presented at the 23rd Convention of the Association for Children and Adults with Learning Disabilities, New York City, NY. (ERIC Document Reproduction Service No. ED 269930).

This paper examines how learning disabled individuals accept the ramifications of their disability. Huestis and Ryland believe that learning disabilities are a life-long disability which will have a significant, psychosocial impact upon the LD individual. They feel that appropriate service delivery must involve changing the attitude of the LD individual towards his/her disability, as well as providing disability-related information. They suggest an approach called Behaviorally Oriented Process Case Management, where LD students learn to alter their own behavior by using short, structured steps.

Huestis and Ryland present a number of valuable observations about

the relationship between learning disabilities and psychotherapy. The authors assert that traditional psychotherapeutic interventions with LD adolescents have long been neglected in the literature of both psychology and learning disabilities. This information void has led to misunderstandings about learning disabilities by many counselors and therapists who see LD clients as part of their caseload. The authors emphasize that it is very important for professionals to understand a number basic assumptions about learning disabilities, such as: 1) Learning disabilities are a complex, handicapping condition; 2) Learning disabilities will have a significant impact on LD individuals and their families; and 3) LD individuals face hard, ongoing struggles when coping with their disability. Huestis and Ryland suggest that therapists and counselors focus part of their therapeutic work on increasing the LD individual's self-esteem and appropriate social functioning.

Jacobs, R. & Rerucha, M. (1986). The use of cross-cultural counseling with disabled students. In Association on Handicapped Student Service Programs in Postsecondary Education (Ed.), Support Services for LD Students in Postsecondary Education: A Compendium of Readings (pp.122-128). Columbus, Ohio: Association on Handicapped Student Service Programs in Postsecondary Education.

Cross-cultural counseling techniques emphasize the differences in attitudes between various groups and the predominant culture group. Jacobs and Rerucha advocate cross-counseling as an effective way to provide appropriate counseling in postsecondary settings for disabled students. They feel that disabled students often perceive themselves as different from their non-disabled peers, as do other minority groups on campus. Consequently they need assistance to identify and cope with their "disability status". The authors use the "Locus of Control/Locus of Responsibility" model to examine personal attitudes. Three scenarios are provided to illustrate how these attitudes relate directly to problems disabled students face on campus.

Kroll, L. G. (1984). LD's--What happens when they are no longer children. Academic Therapy. 20 (2). 133-148.

This article is an overview of various studies about learning disabled adolescents and adults. A number of related areas are briefly described

(e.g. education, learning patterns, and vocational issues). The section discussing socialization contains useful comments for LD service providers. Kroll describes research concerning social adjustment, family life, independence, social skills deficits, delinquent behaviors, mental health issues, therapeutic interventions and self-help groups. She concludes that socialization is a difficult area for many LD individuals. She believes that therapy and self-help groups are two interventions that are promising for this population.

Kuncaitis, A. (1986). Fostering independence in learning disabled students: A counseling approach. In Association on Handicapped Student Service Programs in Postsecondary Education (Ed.), Support Services for LD Students in Postsecondary Education: A Compendium of Readings (pp. 112-115). Columbus, Ohio: Association on Handicapped Student Service Programs in Postsecondary Education.

Dependence vs independence is a critical issue for learning disabled college students. For example, the transition from childhood and adolescence into adulthood is illustrated by the daily struggles which LD students face in postsecondary settings. Kuncaitis explores the dynamics of LD individuals and their families during this important developmental phase. He suggests specific techniques that postsecondary counselors can use to encourage LD individuals to be more independent (i.e. cognitive therapy, a compensatory counseling model, rational-emotive therapy, LD support groups, and family counseling). Suggestions about how to refer LD students to appropriate mental health professionals are also included in this article.

Lutwak, N. & Fine, E. (1983, July). Countertherapeutic styles when counseling the learning disabled college student. Journal of College Student Personnel. pp. 320-324.

A case study of a 19-year-old learning disabled college freshman is used to illustrate various countertherapeutic counseling styles which can be observed when professionals provide psychosocial support to LD individuals. Limiting client options, fostering pseudo-autonomy, negative dependency, advoidance, pigeonholing, and encouraging premature termination are examples of prohibitive styles which can become part of the counseling process. The authors discuss positive ways that counselors can be beneficial to their LD clients. Lutwak and Fine also include a brief

overview of the behavioral manifestations of learning disabilities, which includes the following areas: impaired capacity for conceptual thinking, deficits in reasoning and problem solving abilities, spatial problems, restlessness, impulsivity, poor concentration, serious personality and social problems, low motivation, low ego status, and hypersensitivity.

Mangrum, C. T.& Strichart, S. S. (1984). College and the learning disabled student. New York, N.Y: Grune and Stratton, Inc.

Chapter 13 of Mangrum and Strichart's book titled "Providing Counseling Services" may be especially helpful to postsecondary LD service providers, because it clearly discusses the counseling process as applicable to learning disabled individuals in postsecondary settings. The authors list a number of appropriate counseling goals (e.g. reducing anxiety, increasing self-confidence, learning life skills, and understanding their own learning disability). They discuss counseling principles that are important when working with learning disabled individuals, such as presenting information clearly, providing positive reinforcement and talking about behaviors. They also explore pertinent counseling models (e.g. group counseling, informal rap sessions, individual counseling and career counseling).

Morse, D. (1977). Counseling the young adolescent with learning disabilities. The School Counselor. 25 (1). 8-15.

The focus of this article is the inclusion of counseling in secondary service delivery programs for learning disabled adolescents. Morse describes how learning disabilities influence school behavior, social skills, and personality difficulties. She believes that many LD adolescents see themselves as failures, due to disability-related problems. She emphasizes that it is important for professionals to build self-esteem in learning disabled students. The author also discusses the skills needed to counsel learning disabled individuals and when to use individual or group sessions. This article is full of practical hints for LD service providers in both secondary and postsecondary settings (i.e. using relaxation techniques and real language during counseling sessions).

Neault, E. (1986). Remediating social skill disorders for learning disabled students through group counseling. In Association on Handicapped Student Service Programs in Postsecondary Education (Ed.), Support Services for LD Students in Postsecondary Education: A Compedium of Readings (pp.116-122). Columbus, Ohio: Association on Handicapped Student Service Programs in Postsecondary Education.

Many college students with learning disabilities bring significant social skill deficits into the postsecondary environment. The ramifications are often isolation, loneliness, inactivity, and low self-esteem. Neault describes how a counseling group created at Northwestern University specifically for learning disabled individuals was used to address these deficits. She examines four stages of group process which she observed while the LD support group was in progress: 1) search for similarities, 2) giving and seeking advice, 3) conflict stage, and 4) development of cohesiveness. She discusses the tasks of the leader and how to assess behavioral change in group members. A sample outreach letter is also included. One aspect of the article which may be especially interesting to LD service providers is Neault's explanation of how various neurological processing deficits influence socialization.

National Joint Committee on Learning Disabilities. (1987). Adults with learning disabilities: A call to action. Journal of Learning Disabilities. 20 (3). 172-175.

Nine issues critical to learning disabled adults are listed in this position paper, with brief suggestions to address each issue. One issue examined is the psychosocial impact of learning disabilities upon adults. An example is the call for systematic research programs to look at the relationship between learning disabilities and adult psychosocial maladjustments (i.e. substance abuse, depression, and suicide). Another is the suggestion for the inclusion of individual psychological assistance and peer support groups in postsecondary service delivery programs. A third example is item #9, which refers specifically to the assistance that mental heath professionals can provide for individuals with learning disabilities.

The authors emphasize that personal, social and emotional problems may be an important part of a learning disability. These disability-related problems may surface in LD adults as disturbed patterns of interaction with spouses or children, or difficulties in social relationships. Some LD

adults may also appear to have sev re emotional disorders. The Committee advocates that mental health professionals should be prepared to face the long-term ramifications of a disability that has been frequently misunderstood in the past.

Okolo, C. M., & Sitlington, P. (1986). The role of special education in LD adolescents' transition from school to work. Learning Disability Quarterly. 9 (2). 141-155.

This article looks at the transition needs of secondary learning disabled students as they move into either job training and/or postsecondary vocational education. The authors explore a number of pertinent areas in vocational education and rehabilitation, as it applies specifically to LD individuals.

They assert that interpersonal skills are of critical importance in the workplace. Okolo and Sitlington report that inadequate social skills are one of the main reasons why learning disabled individuals show high rates of unemployment and underemployment. They emphasize that there is a strong relationship between effective interpersonal skills and job success. (This inter-relationship is supported by a brief discussion of pertinent studies). Okolo and Sitlington feel that social skills training has traditionally received little attention in secondary settings. As a result, they advocate that both secondary and vocational educators teach appropriate interpersonal skills to students with learning disabilities.

Orzek, A. M. (1984). Special Needs of the learning disabled college student: Implications for interventions through peer support groups. Personnel and Guidance Journal. 62 (7) 404-407.

The focus of this article is the use of peer support groups with learning disabled college students to meet their academic and personal needs. The author uses Chickering's vectors of development to explore further how these needs are addressed in a support group model. The vectors described are developing competence, managing emotions, developing autonomy, establishing identity, freeing interpersonal relationships, clarifying purpose, and developing integrity. Orzek believes that an effective support group composed of one's peers can provide information and emotional support for individuals with learning disabilities as they develop into adulthood.

Rosenthal, J. H. (1973). Self-esteem in dyslexic children. Academic Therapy. 9(1). 27-39.

This article explores how dyslexic children respond to the ramifications of their disability. The author describes his study of twenty, Caucasian, dyslexic boys (ages 8-14) who exhibited significantly lower self-esteem than two control groups of asthmatic boys and normal boys. He also found that the ten dyslexic boys whose parents had previous knowledge about dyslexia showed higher self-esteem than the ten dyslexic boys whose parents had no knowledge about the disability.

Rosenthal, I. New directions for service delivery to learning disabled youth. Learning Disabilities Focus. 2 (1). 55-61.

This article examines the problems that may be inherent in the rapid growth of many postsecondary service delivery programs for learning disabled individuals. One postsecondary program facet often overlooked is the psychosocial needs of LD students. Rosenthal contends that many programs emphasize cognitive strategies, without also addressing the socio-emotional needs of the LD students. (Examples of these critical needs are social skills, career counseling, guidance to choose appropriate courses, time management, and self-esteem.)

The author concludes with a brief description of a newly funded program at the Counselor Education Department of New York University. This MA-degree program will train postsecondary professionals in both the areas of learning disabilities and counseling, so that service providers will have more a wider expertise in helping LD individuals cope with these critical, psychosocial deficits.

Sachs, J. J., Iliff, V. W., & Donnelly, R. F. (1987). Oh, OK, I'm LD! Journal of Learning Disabilities. 20 (2). pp. 92-93,113.

One important part of postsecondary service delivery for learning disabled students is disability-related information. Sachs, Iliff and Donnelly strongly support disability awareness, as they report that the majority of the LD adolescents whom they serve either do not understand or deny their own disability. Consequently, the authors created an LD seminar to provide information about learning disabilities for LD adolescents. One aspect of the seminar explores effective behaviors of

successful learners and how these behaviors could be applied to each individual LD participant.

The authors evaluated the impact of the seminar with a written questionnaire. Learning disabled students reported that they learned a great deal about themselves from the seminar. After being questioned four months later, related faculty described the seminar participants as more realistic, responsive and cooperative. Faculty members also noted a decrease in negative coping behaviors, (i.e. learned helplessness; projection of learning problems on others; anger at self, school, parents, and peers; self-defeating behaviors; self-delusion and unreasonable academic expectations).

Scheiber, B. & Talpers, J. (1987). Unlocking potential: College and other choices for learning disabled people: A step-by-step guide. Bethseda, MD: Adler and Adler, Inc.

Chapter 8 is titled: "Go the road: Counseling and Support". It is an apt title because the authors clearly discuss many psychosocial issues that LD students face everyday. Scheiber and Talpers stress that frustration, anger, anxiety, and loneliness are the burdens that many LD students carry into postsecondary settings. Consequently, the authors offer many practical hints that LD individuals and their families can use to surmount these socio-emotional hurdles. (For example, they strongly encourage LD individuals to seek psychological assistance, when necessary.) Scheiber and Talpers briefly describe what can happen during individual or group counseling sessions (e.g. psychological diagnosis, various therapeutic techniques, psychodrama, establishing trust, etc.). They illustrate these ideas with numerous references to professionals who currently provide counseling services for LD individuals. A helpful list of resources is also included at the end of the chapter.

Smith, B. K. (1986). "Wilted flower syndrome." Paper presented at the 23rd Conference of the Association for Children and Adults with Learning Disabilities, New York City, New York. (ERIC Document Reproduction Service No. ED 270913).

Smith looks at the social implications of learning disabilities, with a special emphasis on how early social patterns will be influential later in

adult life. He postulates that many LD adults may have missed critical social stages of development as children. Consequently, they may not have developed certain social skills, such as interpretation of social cues, sensitivity to subtle signals, awareness of vocal tonality, realization of time, and interpretation of other people's moods. He also explores how social skill deficits isolate LD adults from their peers. He reports that LD individuals describe intense feelings of isolation, lack of competence in social relationships and not feeling assured of themselves in various social situations. Smith postulates that the lack of self-confidence and self-respect often seen in LD adults can directly result in many problems faced in adulthood, such as marriage or job failures, antisocial behavior and suicide. Consequently, the author suggests a mental health approach which teaches LD adults ways to assume responsiblity for themselves and interact more effectively with others. Part of this approach emphasizes the modification of ineffective social behaviors.

Worcester, L. H. (1981). The Canadian Franco-American learning disabled college student at the University of Maine at Orono. Paper presented at the Council for Exceptional Children Conference of the Exceptional Bilingual Child, New Orleans, LA. (ERIC Document Reproduction Service No. ED 204881).

This paper discusses a study that looked at characteristics of ten Franco-American college students with learning disabilities. After a brief evaluation, research participants were informed about their individual strengths and weaknesses and subsequently received counseling and tutoring. Worcester observed similar psychosocial characteristics in the LD participants throughout the study. She reports that a major weakness for the LD students was their difficulty with cause and effect relationships due to poor self-worth. The author also observed that the LD students were stressful and anxious during the majority of the sessions.

CONCLUSION

At the beginning of this paper, two questions were posed about the psychosocial ramifications of learning disabilities. After examining the previous material, a number of conclusions can be drawn to address those questions.

1) *What are the psychosocial implications of a learning disability?*

Many professionals, drawing on their own experiences from a wid variety of sources, now believe that learning disabilities do have a long-term, psychosocial impact upon adolescents and adults. They have observed that the socio-emotional characteristics seen in LD children often remain and may become more entrenched in adulthood (Huestis & Ryland, 1986; Kuncaitis, 1986; National Joint Committee on Learning Disabilities, 1987; Smith, 1986).

The psychosocial ramifications can be positive or negative and will vary in unique configurations among LD individuals. These individual characteristics can include, but not be limited to: depression, feelings of incompetence and inadequacy, frustration, anger, excessive dependency, shyness, lack of motivation, warmth, intelligence, impusivity and boldness (Brown, 1982; Cohen, 1985; Geist & McGrath, 1983; Hogenson, 1985; Hoffman et al, 1987 and Lutwak & Fine, 1983).

One common characteristic that numerous authors observe in LD adolescents and adults is a pervading sense of low self-esteem (Beare, 1975; Cohen, 1985; Geist & McGrath, 1983; Morse, 1977; Rosenthal, 1973 and Smith, 1986). It should be noted that low self-esteem can also be the root for other negative, behavioral manifestations (e.g. problems with mental health, difficulties with social relationships, and dysfunctional interactions with spouses or children).

Inappropriate or inadequate social skills often go hand-in-hand with a poor self-concept (Alley, Deshler, Schumaker, & Warner, 1983; Bergman, 1986; Brown, 1982, Neault, 1986; Okolo & Sitlington, 1986; and Smith, 1986). Socialization deficits will also vary greatly from individual to individual. However, no matter what form the social skill problems take, they will still have a strong impact on many other areas of adult life. For example, many authors feel that if an LD individual has significant social skill deficits, vocational success is especially at risk (Brill & Brown, 1986; Brown, 1982; Geist & McGrath, 1983; Okolo & Sitlington, 1986).

2) *How can these socio-emotional issues be effectively addressed by various professionals in secondary and postsecondary settings?*

The twenty-eight citations contain many suggestions to work with the diverse psychosocial ramfications of learning disabilities. One common suggestion is the use of individual and/or group counseling for LD individuals (Cooper, 1986; Kroll, 1984; Mangrum & Strichart, 1984; Morse, 1977; Neault, 1986; Orzek, 1983).

Another common theme is the assertion that disability self-awareness is central to successful service delivery for adolescents and adults with learning disabilities (Beare, 1975; Huestis & Ryland, 1986; Sachs, Iliff, & Donnelly, 1987). The importance of disability self-knowledge cannot be underestimated because such self-awareness and self-acceptance are critical for LD individuals. It is through such insights that LD adolescents and adults discover the tools to achieve a satisfactory adult life and learn to interact successfully with others in their environment.

Unfortunately, despite these valuable suggestions there is little information about psychosocial issues and learning disabilities currently available to practioners. A limited number of professionals have been trained in this area, and there is a scarcity of materials or techniques for service providers to draw from. Another confounding factor is the meager research pool about psychosocial issues. Different authors refer to the psychosocial ramifications of learning disabilities, but few present credible studies or empirical data to support their claims. More research, especially longitidual research, is needed if these strong testimonials are to be confirmed and can be generalized to all LD individuals. As a result, many authors conclude that much more attention should be paid to the psychosocial influence of learning disabilities (Huestis & Ryland, 1986; National Joint Committee on Learning Disabilities, 1987; Okolo & Sitlington, 1986).

The areas of psychosocial issues and vocational needs of learning disabled adults is another important subject that has traditionally had little emphasis in the professional literature. However, many authors (Brill & Brown, 1986; Brown, 1982; Geist & McGrath, 1983; Okolo & Sitlington, 1986) clearly see this as a critical area of development for learning disabled individuals. These practictioners firmly believe that job acquisition and job success are directly related to the psychosocial problems and social skills deficits of LD individuals. Yet, few materials or techniques are available to address the socio-emotional needs of LD

individuals in vocational settings. Also, many LD service providers have also had little formalized training in this area.

In summary, those of us who see LD individuals everyday are keenly aware of the psychosocial ramifications of learning disabilities on the individuals that we serve. Both the available literature and my own personal experience point to the need for more information in this critical area. Perhaps, one of the next frontiers in the methodology about learning disabilities is how to effectively address those ramifications in positive, proactive ways.

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